

BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

D2737

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	<u>23</u>	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	<u>23</u> minus 20 = * <u>3</u>	
INDEPENDENT CLAIMS	<u>3</u> minus 3 = * <u>0</u>	
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

SMALL ENTITY TYPE	OTHER THAN SMALL ENTITY
RATE	RATE
BASIC FEE	370.00
X\$ 9=	<input type="checkbox"/>
X42=	<input type="checkbox"/>
+140=	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>
OR	OR
BASIC FEE	740.00
X\$18=	<input type="checkbox"/>
X84=	<input type="checkbox"/>
+280=	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>
OR	OR

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* <u>23</u>	Minus	** <u>23</u> = <input type="checkbox"/>
Independent	* <u>3</u>	Minus	*** <u>3</u>	= <input type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

SMALL ENTITY	OTHER THAN SMALL ENTITY
RATE	RATE
ADDI- TIONAL FEE	ADDI- TIONAL FEE
X\$ 9=	<input type="checkbox"/>
X84=	<input type="checkbox"/>
+280=	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>
OR	OR

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* <u>23</u>	Minus	** <u>23</u> = <input type="checkbox"/>
Independent	* <u>3</u>	Minus	*** <u>3</u>	= <input type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

ADDI- TIONAL FEE	ADDI- TIONAL FEE
X\$ 9=	<input type="checkbox"/>
X84=	<input type="checkbox"/>
+280=	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>
OR	OR

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* <u>23</u>	Minus	** <u>23</u> = <input type="checkbox"/>
Independent	* <u>3</u>	Minus	*** <u>3</u>	= <input type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

ADDI- TIONAL FEE	ADDI- TIONAL FEE
X\$ 9=	<input type="checkbox"/>
X84=	<input type="checkbox"/>
+280=	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>
OR	OR

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.